

N: 033878

NOTICE OF VIOLATION

|                             |       |                                                                       |               |     |    |
|-----------------------------|-------|-----------------------------------------------------------------------|---------------|-----|----|
| Date of Violation           | Time  | <input checked="" type="checkbox"/> AM<br><input type="checkbox"/> PM | Day of Week   | MD  | CD |
| 05/30/2017                  | 11:45 |                                                                       | S M T W T F S | 213 | 11 |
| Name (First, Middle, Last)  |       |                                                                       |               |     |    |
| NOVEL, EDWIN                |       |                                                                       |               |     |    |
| Address                     |       |                                                                       |               |     |    |
| 435 N ROBINWOOD DR          |       |                                                                       |               |     |    |
| City                        |       |                                                                       |               |     |    |
| LOS ANGELES CA 90049        |       |                                                                       |               |     |    |
| Driver's Lic./ID No.        |       |                                                                       |               |     |    |
| State                       |       |                                                                       |               |     |    |
| Class                       |       |                                                                       |               |     |    |
| Age                         |       |                                                                       |               |     |    |
| Birth Date                  |       |                                                                       |               |     |    |
| Sex                         |       |                                                                       |               |     |    |
| Hair                        |       |                                                                       |               |     |    |
| Eyes                        |       |                                                                       |               |     |    |
| Height                      |       |                                                                       |               |     |    |
| Weight                      |       |                                                                       |               |     |    |
| Race                        |       |                                                                       |               |     |    |
| Vehicle License No. or VIN  |       |                                                                       |               |     |    |
| State                       |       |                                                                       |               |     |    |
| Yr. of Veh.                 |       |                                                                       |               |     |    |
| Make                        |       |                                                                       |               |     |    |
| Model                       |       |                                                                       |               |     |    |
| Body Style                  |       |                                                                       |               |     |    |
| Color                       |       |                                                                       |               |     |    |
| Contractor's License Number |       |                                                                       |               |     |    |
| Company Name                |       |                                                                       |               |     |    |
| Company Address             |       |                                                                       |               |     |    |

|                                                                                                                 |       |          |
|-----------------------------------------------------------------------------------------------------------------|-------|----------|
| City                                                                                                            | State | Zip Code |
| LOS ANGELES                                                                                                     | CA    | 90049    |
| Violation Description                                                                                           |       |          |
| DIRT & EQUIPMENT OBSTRUCTION                                                                                    |       |          |
| 1. LANCST. OF REMOVE THE DIRT                                                                                   |       |          |
| & OTHER EQUIPMENT THAT IS                                                                                       |       |          |
| OBSTRUCTING THE PUBLIC STREET                                                                                   |       |          |
| <input type="checkbox"/> See Reverse Side for Violation                                                         |       |          |
| Location of Violation(s)                                                                                        |       |          |
| 135 N. ANITA AVE. C.A.                                                                                          |       |          |
| Violation Noticed was:                                                                                          |       |          |
| <input type="checkbox"/> Posted <input checked="" type="checkbox"/> Hand Served <input type="checkbox"/> Mailed |       |          |
| Comments                                                                                                        |       |          |

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct.

|                               |                              |
|-------------------------------|------------------------------|
| Investigator                  | Serial Number                |
| AL                            | 69329                        |
| (213) 847-6044                | 7 am - 8 am :30 pm - 3:30 pm |
| Investigator Telephone Number | Office Hours                 |

Signing this notice is not an admission of guilt; only confirmation that the notice was received.

X Signature

YOU ARE REQUIRED TO:

- ☒ COMPLY WITH THIS NOTICE AT ONCE
- ☐ COMPLY WITH THIS NOTICE WITHIN \_\_\_\_\_ DAYS FROM THE DATE SHOWN ABOVE.
- ☐ APPEAR FOR A HEARING ON \_\_\_\_\_ AT  
1149 S. BROADWAY, SUITE 350, L.A. CA 90015 BETWEEN \_\_\_\_\_ AND \_\_\_\_\_
- ☐ PAY FEES AND/OR FINES IN THE AMOUNT OF \_\_\_\_\_. PLEASE SEND PAYMENT  
TO THE ORDER OF THE "CITY OF LOS ANGELES" TO THE ADDRESS SHOWN BELOW  
BUREAU OF STREET SERVICES. INVESTIGATION AND ENFORCEMENT DIVISION  
1149 S. BROADWAY, SUITE 350  
LOS ANGELES, CA 90015

FAILURE TO COMPLY WITH THIS NOTICE MAY RESULT IN FURTHER LEGAL, AND/OR CITY ACTION  
AT THE PROPERTY OWNERS EXPENSE.

N: 033876

NOTICE OF VIOLATION

|                             |       |                                                                       |               |     |    |
|-----------------------------|-------|-----------------------------------------------------------------------|---------------|-----|----|
| Date of Violation           | Time  | <input checked="" type="checkbox"/> AM<br><input type="checkbox"/> PM | Day of Week   | MD  | CD |
| 05/30/2017                  | 10:20 |                                                                       | S M T W T F S | 213 | 11 |
| Name (First, Middle, Last)  |       |                                                                       |               |     |    |
| STORAGE CONTAINER CON       |       |                                                                       |               |     |    |
| Address                     |       |                                                                       |               |     |    |
| 1-800-LA-STORE              |       |                                                                       |               |     |    |
| City                        |       |                                                                       |               |     |    |
| LOS ANGELES CA              |       |                                                                       |               |     |    |
| Driver's Lic./ID No.        |       |                                                                       |               |     |    |
| State                       |       |                                                                       |               |     |    |
| Class                       |       |                                                                       |               |     |    |
| Age                         |       |                                                                       |               |     |    |
| Birth Date                  |       |                                                                       |               |     |    |
| Sex                         |       |                                                                       |               |     |    |
| Hair                        |       |                                                                       |               |     |    |
| Eyes                        |       |                                                                       |               |     |    |
| Height                      |       |                                                                       |               |     |    |
| Weight                      |       |                                                                       |               |     |    |
| Race                        |       |                                                                       |               |     |    |
| Vehicle License No. or VIN  |       |                                                                       |               |     |    |
| State                       |       |                                                                       |               |     |    |
| Yr. of Veh.                 |       |                                                                       |               |     |    |
| Make                        |       |                                                                       |               |     |    |
| Model                       |       |                                                                       |               |     |    |
| Body Style                  |       |                                                                       |               |     |    |
| Color                       |       |                                                                       |               |     |    |
| Contractor's License Number |       |                                                                       |               |     |    |
| Company Name                |       |                                                                       |               |     |    |
| Company Address             |       |                                                                       |               |     |    |

|                                                                                                                 |       |          |
|-----------------------------------------------------------------------------------------------------------------|-------|----------|
| City                                                                                                            | State | Zip Code |
| LOS ANGELES                                                                                                     | CA    | 90049    |
| Violation Description                                                                                           |       |          |
| CONTAINER OBSTRUCTING ROADWAY                                                                                   |       |          |
| 1. LANCST. OF OBSTRUCTIONS                                                                                      |       |          |
| REMOVE THE CONTAINER THAT IS OBSTRUCTING                                                                        |       |          |
| PUBLIC ROADWAY OR OBTAIN A POSSIBLE                                                                             |       |          |
| PERMIT @ <a href="http://BSSPERMITS.LACITY.ORG/">HTTP://BSSPERMITS.LACITY.ORG/</a>                              |       |          |
| BUILDING MATERIALS                                                                                              |       |          |
| <input type="checkbox"/> See Reverse Side for Violation                                                         |       |          |
| Location of Violation(s)                                                                                        |       |          |
| 725 N. JACOB WAY. C.A. 90072                                                                                    |       |          |
| Violation Noticed was:                                                                                          |       |          |
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| Comments                                                                                                        |       |          |

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